Image# 202104169443779960 PAGE 1 / 1

## FEC FORM 2

## STATEMENT OF CANDIDACY

1 (a) Nam	a of Condidate (in full)									
	e of Candidate (in full)									
	Bilirakis, Gus, M, ,  (b) Address (number and street) □ Check if address changed						te's FFC Identi	fication N	ımher	
(b) Address (number and street)			neck ii addre	. II address changed			Candidate's FEC Identification Number     H6FL09070			
( ) ),	State, and ZIP Code					3. Is This			Amended	
Tarpon Springs			FL	FL 34688-0606			nent (N)	OR	<b>x</b> (A)	
4. Party Af	filiation	5. Office Soug	ght		6. State & Dist	trict of Candid	date			
REPUE	BLICAN PARTY	House			FL	12				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)										
NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full)										
Bilirakis for Congress										
	ress (number and street)									
РО	Box 606									
(c) City,	State, and ZIP Code									
Ta	rpon Springs				FL	34688	3-0606			
	DE	SIGNATIO	N OF OT	HER AU	<b>THORIZED</b>	COMMIT	TEES			
		(	Including Joir	nt Fundraisin	g Representativ	res)				
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my										
candida	•	nea committee	, WHICH IS NO	т тту ртттстра	ai campaign coi	millitiee, to re	ceive and expe	ena iunas	on benan or my	
NOTE: 3	This designation should be	iilad with the pr	incinal campa	ian committ	20					
NOTE: This designation should be filed with the principal campaign committee.										
` ,	e of Committee (in full)									
Gl	us Bilirakis Victory	/ Fund								
(b) Addr	ress (number and street)									
	Box 2485									
(c) City, State, and ZIP Code										
Spr	ringfield				VA	22152	-0485			
	I certify that I have exa	nmined this Sta	tement and to	the best of	my knowledge a	and belief it is	true, correct a	nd comple	te.	
Signature of Candidate						Date				
Bilirakis, G	Gus, M, ,		(T)		04/16/20	21				
				[Eleci	ronically Filed]	0 1, 10, 20				
						1				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
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FEC FORM 2 (REV. 02/2009)